### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
   This Form must be <u>completed</u> by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

	ACCIDENT STATEMENT
Date Of Report	31/03/2018 08:38
Date Of Accident	30/03/2018 12:40
Exact Location Of Accident	MANDAI ROAD TOWARDS MANDAI CREMATORIUM
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHC4303P
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Deller Month	

Policy Number D-17087562MFSH

Cover Note Number

Driver

Name of Driver TAN HOCK CHENG

NRIC No S6913492J Date Of Birth 09/04/1969 Occupation OUTDOOR Date Of Driving Pass 20/11/1989

**Driving Experience** 28 YEARS AND 4 MONTHS

Gender MALE

Mobile Number Fax Number Contact Number

**EMail Address** NOEMAIL Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

484

Insurance Company of Driver's Own Vehicle

### General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR Road Surface DRY

### Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

4

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: FEMALE

# **Details of Police Action**

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

## Circumstances of Accident

I WAS STATIONARY ALONG MANDAI ROAD TOWARDS MANDAI CREMATORIUM WITH 3 PASSENGERS(2 FEMALE /1 MALE CHINESE) ON BOARD. TRAFFIC WAS HEAVY AS ALL THE VEHICLE'S WERE GOING INTO MANDAI CREMATORIUM FOR THE QING MING FESTIVAL PRAYERS, WHILST I WAS STATIONARY I FELT AN IMPACT AT THE REAR OF MY TAXI, A VEHICLE GBE1386E TRIED TO OVERTAKE MY TAXI AGAINST THE FLOW OF TRAFFIC WHICH RESULTED IN COLLIDING INTO THE RIGHT REAR PORTION OF MY TAXI.

### Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded? NO

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number GBE1386E

Vehicle Make/Model/Colour

**Details Of Properties** 

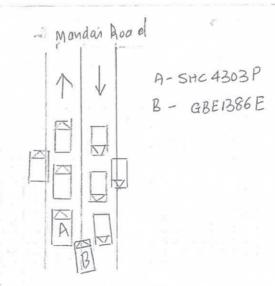
COMMERCIAL VEHICLE

Vehicle Category Name of Driver

ZHUO WEIJIE

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN



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DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

## SKETCH PLAN

### **IMPORTANT NOTICE**

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- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Timed

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Company	
Owner ID:	5369K	
Vehicle Details		
Vehicle No.:	SHC4303P	
Vehicle to be Exported:	No	
ntended De-registration Date:	05 Apr 2018	
Vehicle Make:	TOYOTA	
Vehicle Model:	PRIUS TAXI (SMRT)	
Primary Colour:	Maroon	
Manufacturing Year:	2014	
Engine No.:	2ZR5887105	
Chassis No.:	JTDKN36U805742185	
Maximum Power Output:	100.0 kW (134 bhp)	
Open Market Value:	\$33,120.00	
Original Registration Date:	07 May 2014	
First Registration Date:	07 May 2014	
Transfer Count:	0	
Actual ARF Paid: Intended PARF Rebate Details	\$8,368.00	
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	06 May 2022	
PARF Rebate Amount: Intended COE Rebate Details	\$6,276.00	
COE Expiry Date:	06 May 2022	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	8	
PQP Paid:	\$60,414.00	
COE Rebate Amount:	\$30,856.00	
Total Rebate Amount: Message	\$37,132.00	

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 05 Apr 2018

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